



**CONTRACT AWARD SHEET**  
**Internal Services Department**  
**Procurement Management Services**

**Procurement Management** DIVISION

*Bid No. **RTQ-00103***  
*Award Sheet*

BID NO.: **RTQ-00103**

PREVIOUS BID NO.: **NONE**

TITLE: **PROTECTIVE COATING SERVICES - PREQUAL**

CURRENT CONTRACT PERIOD: **05/14/2015** through **05/31/2023**

Total # of OTRs: **0**

**MODIFICATION HISTORY**

*Bid No. **RTQ-00103***

*Award Sheet*

**DPM Notes**

**APPLICABLE ORDINANCES**

LIVING WAGE: **Yes**

UAP: **Yes**

IG: **No**

OTHER APPLICABLE ORDINANCES:

**CONTRACT AWARD INFORMATION:**

**No** Local Preference

**No** Micro Enterprise

Full Federal Funding

**No** Performance Bond

Small Business Enterprise (SBE)

PTP Funds

Partial Federal Funding

**No** Insurance

Miscellaneous:

REQUISITION NO.:

PROCUREMENT AGENT:

**Erin Gore-Morris**

PHONE: 305 375-4254

FAX: 305 375-4407

EMAIL: [eringm@miamidade.gvo](mailto:eringm@miamidade.gvo)

DEPARTMENT OF PROCUREMENT MANAGEMENT

Procurement Management DIVISION

Page 1 of 6

VENDOR NAME: **ENECON CORPORATION**  
 DBA:  
 FEIN: **232593118** SUFFIX : **01** CITY: **MEDFORD** ST: **NY** ZIP: **11763**  
 STREET: **6 PLATINUM CT**  
 FOB\_TERMS: **DEST-P** DELIVERY:  
 PAYMENT TERMS: **NET45** TOLL PHONE: **-**

**VENDOR INFORMATION:***CERTIFIED VENDOR**ASSIGNED MEASURES*

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

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**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
ELIZABETH KESSLER	305-340-7731	-	516-349-5522	ELIZABETHKESSLER@ENECON.COM

VENDOR NAME: **ATLAS POLYMERS CORP**  
 DBA:  
 FEIN: **462470436** SUFFIX : **01** CITY: **MIAMI** ST: **FL** ZIP: **33172**  
 STREET: **2930 MW 108 AVENUE**  
 FOB\_TERMS: **DEST-P** DELIVERY:  
 PAYMENT TERMS: **NET14** TOLL PHONE: **-**

**VENDOR INFORMATION:***CERTIFIED VENDOR**ASSIGNED MEASURES*

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

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**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
ADOLFO E ROSENDO	786-312-1231	-	786-217-1244	INFO@ATLAS-POLYMERS.COM

VENDOR NAME: **SOUTHLAND PAINTING CORP**  
 DBA:  
 FEIN: **592278618** SUFFIX : **01** 33319  
 STREET: **2635 NW 4TH STREET** CITY: **FORT LAUDERDALE** ST: **FL** ZIP:  
 FOB TERMS: **DEST-P** DELIVERY:  
 PAYMENT TERMS: **NET45** TOLL PHONE: **-**

**VENDOR INFORMATION:**

*CERTIFIED VENDOR*

*ASSIGNED MEASURES*

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

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**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
JOZEF KAMIEL VERSHELST	954-748-2770	-	954-748-2901	JEFKMV45@MSN.COM

VENDOR NAME: **CONSTRUCTION AFFAIRS INC**  
 DBA:  
 FEIN: **651039792** SUFFIX : **01** 33157  
 STREET: **10203 SW 184TH STREET** CITY: **MIAMI** ST: **FL** ZIP:  
 FOB TERMS: **DEST-P** DELIVERY:  
 PAYMENT TERMS: **NET14** TOLL PHONE: **-**

**VENDOR INFORMATION:**

*CERTIFIED VENDOR*

*ASSIGNED MEASURES*

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

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**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
JOHN F KENNEDY	786-355-5688	-	786-573-4433	JFKENN2002@AOL.COM

VENDOR NAME: **FLORIDA SERVICE PAINTING INC**  
 DBA: **SERVICE PAINTING OF FLORID**  
 FEIN: **743030989** SUFFIX : **01** **33966**  
 STREET: **12140 METRO PARKWAY, SUITE K** CITY: **FORT MYERS** ST: **FL** ZIP:  
 FOB TERMS: **DEST-P** DELIVERY:  
 PAYMENT TERMS: **NET45** TOLL PHONE: **-**

**VENDOR INFORMATION:**

*CERTIFIED VENDOR*

*ASSIGNED MEASURES*

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

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**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
BRAD ERVANS	239-9397622	-	239-9391543	bradervans@servicepainting.net

VENDOR NAME: **POOLE & KENT COMPANY OF FLORIDA**  
 DBA:  
 FEIN: **753163466** SUFFIX : **01** **33125**  
 STREET: **1781 N.W. North River Drive** CITY: **Miami** ST: **FL** ZIP:  
 FOB TERMS: **DEST-P** DELIVERY:  
 PAYMENT TERMS: **NET45** TOLL PHONE: **-**

**VENDOR INFORMATION:**

*CERTIFIED VENDOR*

*ASSIGNED MEASURES*

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

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**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
Brian D MacClugage	305-3251930	-	305-3240522	brianm@pkflorida.com

VENDOR NAME: **CYPRESS CONSTRUCTION & COATING INC.**  
 DBA:  
 FEIN: **650404168** SUFFIX : **01** CITY: **Lehigh Acres** ST: **FL** ZIP: **33971**  
 STREET: **3611 Lee Blvd.** DELIVERY:  
 FOB TERMS: **DEST-P** TOLL PHONE: **-**  
 PAYMENT TERMS: **NET45**

**VENDOR INFORMATION:**

*CERTIFIED VENDOR*

*ASSIGNED MEASURES*

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

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**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
James Boggs	239-3033250	-	239-3033252	nancy@cypresscc.net

**ITEMS AWARDED Section:**

Details: **RTQ-00103**

See roadmap attached.

Item #	Description	Qty	Unit Price
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**End of ITEMS AWARDED Section**

**AWARD INFORMATION Section**

BCC Award: DPM Award: **No**  
 BCC Date: DPM Date: **04/08/2015**

Contract Amount: \$ **48,000,000.00**

Additional Items Allowed:

Agenda Item No.:

Special Conditions:

**Insurance type 01**

**BPO INFORMATION Section:**

1	ABCW1500431	
	Commodity ID	Commodity Name
	630	PAINT, PROTECTIVE COATINGS, VARNISH,
	Department	Department Allocation
	WS	\$48,000,000.00

**End of BPO Information Section**